SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 26089OF 28335 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) NRSC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GALASSO, MARY, , , Date of Receipt Mailing Address 21070 WOODLAND GLEN DR. 30 2021 City Zip Code State Transaction ID: SA11A.20274234 MI **NORTHVILLE** 48167-2443 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **RETIRED** RETIRED CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED 620.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GALIOTO, LINDA, , , Date of Receipt Mailing Address 1575 TANGLEWOOD LN 2021 **APT H129** City State Zip Code Transaction ID: SA11A.20269199 **ESCONDIDO** CA 92029-3213 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DR. MCKINNEY **RECEPTIONIST** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED Other (specify) 255.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. GALITA, DAN, , MR., Date of Receipt Mailing Address 9241 HIGHLAND DR. 30 2021 City State Zip Code Transaction ID: SA11A.20266698 OH **BRECKSVILLE** 44141-2605 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION **CCMEO PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED 2145.00 Other (specify) 135.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....